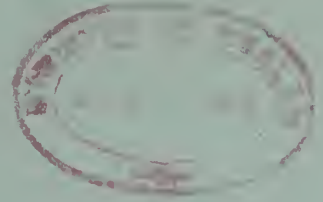


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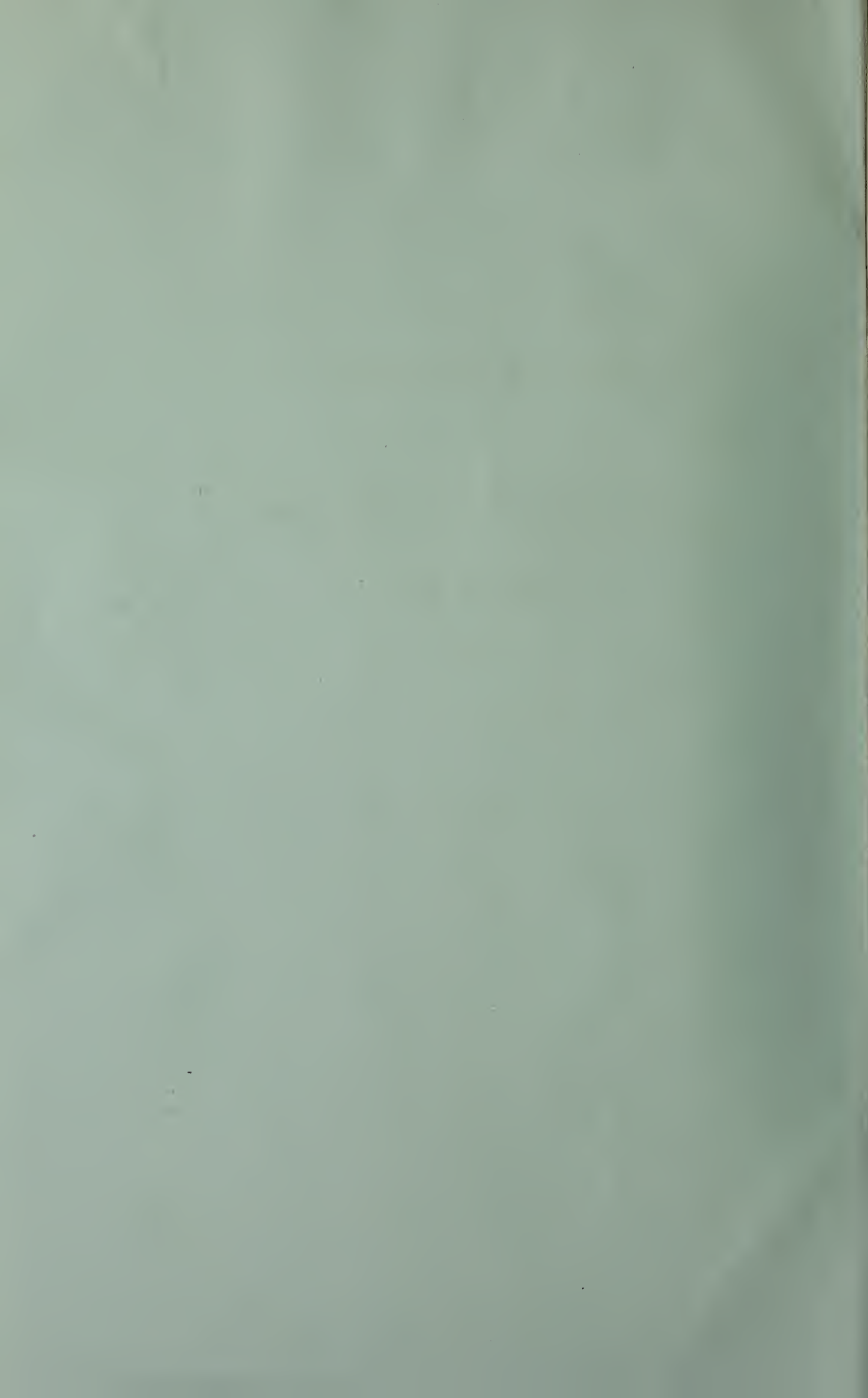


LEDBURY RURAL DISTRICT COUNCIL.

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

FOR THE YEAR

1945.



LEDDBURY RURAL DISTRICT COUNCIL.ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH.FOR THE YEAR1 9 4 5STAFF OF THE PUBLIC HEALTH DEPARTMENT.Medical Officer of Health:

WILLIAM HOGG, M.B., M.R.C.S., L.R.C.P., D.P.H., M.R.S.I.

Clerical Staff:

+ Mrs. O.N. LITTLE. (Resigned 31.10.45)

+ Miss. P.M. RUDHALL. (Resigned 23. 6.45)

+ Miss. D.R. PLASCOTT. (Appointed 1.10.45)

(+ Temporary Appointments).

Telephone - Ross 214.

County Offices,
Alton Street,
Ross-on-Wye.Sanitary Inspector & Surveyor:

E.E. JORDAN, A.R.S.I., M.S.I.A.

Assistant to the Sanitary Inspector & Surveyor:

+ E.G. WATKINS.

(+ Now Serving with H.M. Forces)

Telephone - Ledbury 130.

Council Offices,
Southend,
Ledbury.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit my Annual Report for the year 1945, which is in accordance with Circular 28/46. The year saw the change from war to peace, but little actual progress could be made in the urgent health problems facing the Council. The most important of these subjects are, of course, housing, water supplies, sewerage, and refuse collections.

The health of the inhabitants remained satisfactory apart from an increased incidence of measles during the first six months of the year.

It gives me very great pleasure to place on record my appreciation of the support which the Council has given me in the discharge of my duties throughout the year. I have to acknowledge also the assistance given me in the preparation of this report, and throughout the year by my colleagues Mr. H.W. Orme, Clerk to the Council,

Mr. A.T. Thomas, Financial Officer and Mr. E.L. Jordan, Sanitary Inspector and Surveyor.

I am, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

William Hogg

Medical Officer of Health.

March 1946.

SECTION A. STATISTICS AND SOCIAL CONDITIONS OF THE AREA:

Area (in acres)	49,867
Number of Inhabited Houses (end of 1945)	2,504
Rateable Value	33,812
Sum Represented by a Penny Rate	£143. 12. 3d.
Registrar General's Estimated Resident Population ...	8,334

Extract from Vital Statistics of the Year:

<u>Live Birth</u> Rate per 1,000 of estimated resident population	17.0
<u>Stillbirths</u> Rate per 1,000 Total Births (Live & Still)	18.1
<u>Death</u> Rate per 1,000 of estimated resident population (crude)	11.9

Deaths from Puerperal Causes:

	<u>Deaths</u>	<u>Rate per 1,000</u> <u>Total Births.</u>
Heading No. 29 ... Puerperal Sepsis	Nil	Nil
Heading No. 30 ... Other Puerperal Causes	2	13.2

Death Rate of Infants under One Year of Age:

All Infants per 1,000 Live Births	35.2
Legitimate Infants per 1,000 Legitimate Live Births	39.7
Illegitimate Infants per 1,000 Illegitimate Live Births .	Nil

Population:

The Registrar General's estimate of the mid year resident population is 8,334 but during the month of September there is a large influx of population owing to the hop-picking. It is probable that the population is temporarily increased by 80% for a period of from four to six weeks depending upon the crop. It is estimated that half of this increase is due to children under 14 years of age.

The estimated average number of persons per inhabited house is 3.3. The average number of inhabited houses per acre is 0.050 and the estimated average number of persons per acre is 0.16. The natural increase of the population i.e. the excess of births over deaths for the year was 43.

Births:

A total of 142 live births (66 males and 60 females) were registered, giving a birth rate of 17.0 per thousand of the estimated resident population, compared with 16.1 for England and Wales.

The number of illegitimate live births was 16 (10 males and 6 females) which is 11.3% of the total live births.

Stillbirths:

There were 9 still births registered, which gives a rate of 18.1 per thousand of the total births, or 1.1 per 1000 of the estimated population.

Deaths:

The actual number of deaths recorded as having occurred within the Rural District is 99, after deduction of deaths of non-residents and the addition of deaths of residents which occurred outside the District. This gives a crude death rate of 11.9 per thousand of the estimated resident population.

A Table of Causes of Death according to sex is given at the end of this Report.

Infant Mortality:

There were 5 deaths of infants under one year of age, giving an infantile mortality rate of 35.2 per thousand live births.

Cancer Deaths:-

There were 9 deaths attributed to cancer (5 males and 4 females) giving a mortality rate of 1.0 per thousand of the estimated resident population.

Deaths from Diarrhoea:-

Diarrhoea was the cause of death of 2 female children under the age of 2 years.

SECTION B. GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA:

Laboratory Facilities:

No change has been made in the facilities for the laboratory examination of clinical materials and water and milk. These examinations are carried out at the Public Health Laboratory maintained by the Medical Research Council under the Emergency Public Health Laboratory Service at County Offices, Hereford, under the direction of Dr. R. Ewart Jones.

The following table shows the work carried out on behalf of the Department:-

Specimens Examined:

Swabs	...	...	...	...	...	55
Sputum	...	...	...	...	...	1
Faeces	...	...	...	...	...	5
Water - Bacteriological Examination	...	...	...	...	...	51
Water - Chemical Examination	...	...	...	...	...	38

Ambulance Facilities:

Ambulance facilities are provided from the towns of Ledbury, Malvern and Hereford. Infectious disease is dealt with by the ambulance stationed at the Stretton Sugwas Hospital.

Hospitals:

There are no hospitals within the District, the needs of which are met by the facilities provided in the general hospitals in Ledbury, Malvern and Hereford. Accommodation for the treatment of infectious disease is provided by the Council at the Stretton Sugwas Hospital belonging to the Hereford Rural District Council

Clinics:

An Infant Welfare Clinic is held every fortnight in the Parish of Colwall by a voluntary committee with assistance from the Herefordshire County Council.

SECTION C. SANITARY CIRCUMSTANCES OF THE AREA:Water:

The water supplies in the area are diverse in character and embrace public wells, numerous private wells, private piped schemes utilising spring water and mains of public undertakers. The water supplies vested in the Local Authority are confined to public wells.

With so very many separate sources of supply, it is impossible for the Department to exercise fully, adequate supervision over the quality of the waters being consumed in the area. In actual practice, urgent matters relating to potability of supply are dealt with as they arise. During the year, 38 samples of water were submitted for chemical examination and 51 for bacteriological examination.

Apart from the mains of the Malvern Urban District Council in the Parish of Colwall and those of the Ledbury Urban District Council in the Parishes of Eastnor and Ledbury Rural, there are no chlorinated supplies in operation.

It is estimated that 579 dwelling houses are connected to piped water schemes within the District, 432 of these being situated in the Parish of Colwall. All these supplies are by means of separate services and no stand pipes are in use.

As a result of the water being derived from shallow sources, shortages are prone to occur during periods of low rainfall. This causes most difficulty during the month of September when the population is increased by about 80% due to hop-pickers. When this occurs, the grower usually hauls water in containers to his premises, and whilst generally speaking the grower exercises care, nevertheless, there appears to be some increased risk of pollution connected with it.

There is no evidence that any of the waters used for portable purposes in the District have any tendency to dissolve metals. Rain water which is used fairly generally may have this property.

An extension of piped water supplies is very necessary is improvement in environmental hygiene is to make much progress. During the year, the District was surveyed by the Consulting Water Engineer appointed by the County Council in connection with his report up a comprehensive water scheme for the County. The real necessity is the provision of piped supplies to groups of dwellings, two obvious examples are at Ashburton and Wellington Heath. The isolated dwelling will depend upon an individual well for some considerable time.

Drainage and Sewerage:

The Parish of Colwall is provided with a system of public sewers. There are a number of dwellings in the Parish however, which are not yet connected to the public sewers. A small sewerage disposal works is provided and with much effort this functions in a fairly satisfactory manner. There can be no doubt, however, that the time is rapidly approaching when the present works require replacement by new larger works designed on modern lines.

In addition to the public sewers at Colwall, there is a short length of public sewer in the Parish of Bosbury. No disposal works are provided.

No extensions of public sewers were carried out during the

year. All new and reconstructed drains were tested by the Sanitary Inspector before completion. There were 22 new house drains constructed during the year, and 3 drains improved.

If an extension of piped water supplies should be carried out, there will be a need to provide additional sewers in certain portions of the District.

Rivers and Streams:-

Rivers and streams in the area were inspected from time to time. The condition of the River Leadon showed no appreciable change and it would appear that an improvement is necessary. One factor which created cause for dissatisfaction was the effluent from a factory within the District. As a result of informal action by the Department, the occupier has taken expert advice and a system of disposal of the most modern design will be installed within the coming year.

However, there is one other effluent passed into this river which requires some improvement. The installation concerned is situated outside of your District.

The Cradley Brook was regularly inspected and the condition was fairly satisfactory. Improvement in the effluent from the Colwall sewage disposal works will ultimately become necessary.

Closet Accommodation:-

Many dwellings still depend upon pail closets and privies, and the water carriage system is in general use only in the Parish of Colwall. Whilst the Department continues to secure conversions whenever possible, the progress is necessarily slow, for piped water supplies are essential before water closets can be installed. No marked change can be expected until piped supplies are in more extended use.

Nevertheless, 14 new water closets were provided, 4 privies and 7 pail closets were converted to water closets during the year. No conversions of privies to pail closets were secured.

Public Cleansing:-

A weekly collection of domestic refuse is operated by the Local Authority in the Parish of Colwall. The collection is made by motor vehicle by contract, and disposal is by tipping. The small tip is maintained in a satisfactory manner. No other Parish in the District is provided with a refuse collection at the present time.

No street cleansing is carried out by the Local Authority.

Sanitary Inspection of the Area:-

The Sanitary Inspector, Mr. E.E. Jordan, continued to discharge his duties throughout the year with efficiency and tact. Mr. E.G. Watkins, Assistant to the Sanitary Inspector was absent throughout the whole of the year as a result of his service overseas with H.M. Forces. The loss of his services was felt in connection with the Housing Survey and with inspection of hop-pickers quarters.

I am indebted to the Sanitary Inspector for the following statement furnished in accordance with Article 27 (Sub-section 18) of the Sanitary (Outside London) Regulations 1935:-

Inspections:-

Building Byelaws	...	...	...	...	...	...	93
Bakehouses	...	...	...	...	...	...	Nil
Dairies and Cowsheds	...	...	...	n...	...	...	96
Factories with Mechanical Power	...	...	...	...	...	...	6
Factories without Mechanical Power	...	...	...	...	...	...	Nil

Inspections:- (Contd)

Housing Consolidated Regulations 1925	...	...	...	...	Nil
Other Housing Inspections	...	...	...	...	132
Hop-pickers Quarters	...	...	...	...	51
Infectious Disease	...	...	...	...	29
Nuisances	...	...	...	...	44
Schools	...	...	...	...	3
Slaughter Houses	...	...	...	...	Nil
Water Supplies	...	...	...	...	103
Miscellaneous	...	...	...	...	52
					<hr/>
					609

Notices Issued:-

Informal	...	...	...	...	...	44
Statutory re Housing	...	...	...	...	...	Nil
Statutory under Other Acts	...	...	...	...	...	2
						<hr/>
						46

Summary of Defects Remedied:-

Wells Cleansed and Repaired	...	...	...	21
Houses Supplied from Waterworks	...	...	...	6
House Drains Laid or Relaid	...	...	...	22
Drain Cleansed, Trapped and Bentilated	...	...	...	3
Defective Waste Pipes Rectified	...	...	...	1
Defective W.C.'s, Sinks and Urinals Rectified	...	...	...	1
Drains and Sanitary Fittings Repaired	...	...	...	3
New W.C.s Provided	...	...	...	14
Disinfections after Infectious Disease	...	...	...	9
Houses Cleansed and Linewashed	...	...	...	Nil
Privies converted to Pail Closets	...	...	...	Nil
Privies converted to Water Closets	...	...	...	4
Pail Closets converted to Water Closets	...	...	...	7
				<hr/>
				91
				<hr/>

School Closures:-

There were no school closures on health grounds during the year.

Hop-pickers Quarters:-

Bye-laws regulating the accommodation for hop and fruit pickers are in operation throughout the District. The principal industry calling for resident pickers is hop-growing and camps for pickers are provided on just over seventy farms. There were 51 inspections of these premises made during the year. More frequent inspections are to be desired but this is dependant upon staff. Generally speaking the condition of the camps was fairly satisfactory and owing to the inadequate labour supply the growers have found difficulty in maintaining the camps in a tidy state. Litter has been the most troublesome defect but this showed a slight improvement upon conditions prevailing during the previous year.

The accommodation provided by one grower barely complied with the requirements of the Bye-laws. This matter is receiving your officers attention.

Dr. Brunyate, the Inspector of the Ministry of Health, made the usual inspection and his report was submitted to the Council.

Swimming Baths:-

Two open air swimming baths situated within the boundaries of the District were open to the public, on payment, during part of the year. One of these is a small bath of a very old pattern and cannot be regarded as satisfactory.

SECTION D. - HOUSING:

The efforts of the Department were again directed chiefly towards the maintenance of existing dwellings in good habitable order. Altogether 132 inspections were made in connection with housing defects, and as a result of informal action repairs were secured to 59 dwellings.

During the year, the 6 dwellings constructed under the war time scheme for agricultural workers were completed and occupied. In addition 9 new dwellings were constructed by private owners. Of these, 2 were constructed for housing agricultural workers.

The preliminary work in connection with the first post-war housing scheme to be carried out by the Council was almost completed. This scheme ultimately crystallized into a total of 54 dwelling houses, allocated to seven parishes as follows:-

Bosbury	...	...	8 Dwellings.
Colwall	...	...	12 "
Eastnor	...	...	6 "
Mathon	...	...	6 "
Pixley	...	...	8 "
Putley	...	...	8 "
Woolhope	...	...	6 "

The provision of water supplies continues to be one of the greatest difficulties in connection with the construction of new dwellings. This limits the location of new housing very considerably, it also hampers the grouping of dwellings so necessary for the provision of modern amenities at a reasonable cost.

There are a number of unfit houses still used for human habitation and new accommodation will be required for rehousing these people.

Overcrowding does occur but this is not a major problem in the housing circumstances of the District.

SECTION E. - SUPERVISION & INSPECTION OF FOOD SUPPLIES:

Milk:-

At the end of the year, 200 premises were registered with the Local Authority under the Milk and Dairies Order 1926. This number showed no change on the previous year. The number of retail purveyors remained unchanged at 53.

In spite of difficulties, the number of inspections of cow-sheds and dairies remained almost unchanged at 96.

No samples of milk were submitted to the Public Health laboratory during the year for bacteriological examination. No instance of, or suspected, milk borne disease came to the attention of the Department during the year.

There are no plants for pasteurization or sterilisation of milk situated within the boundaries of the District, and no licences or supplementary licences for the sale of Pasteurized Milk under the Milk (Special Designations) Order were issued by the Council.

Ice Cream etc:-

With the termination of the war, the sale of ice cream recommenced. There are two premises registered with the Local Authority, under Section 14 of the Food and Drug Act 1938, for the manufacture or sale of ice cream.

Meat and Other Foods:-

There are no slaughterhouses in use within the District, all slaughtering for meat for human consumption is now carried out at the Central Abattoir in Hereford. The necessity for inspection of slaughterhouses did not arise.

A certain amount of the Sanitary Inspector's time is devoted to the inspection of food exposed for sale etc., and in the course of this work the following food was found to be undound and unfit for human consumption:-

Pork Sausage	...	...	...	15 lbs.
Hog's Puddings	...	...	...	1 lb.
Veal and Ham Pies	...	...	...	1 lb. x 10.
Pork Pies	...	...	...	1 lb. x 36.
Sausage Rolls	...	...	...	4 oz. (approx) x 24.

One notification of food poisoning was received by the Department during the year. This was a somewhat doubtful case. No infected food was discovered, but a defective drain was found to permit contamination of the well providing the drinking water supply.

SECTION F. - PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASE:-

During the year 218 notifications of infectious disease, occurring in civilians, were received by the Department. Of this total, 187 notifications were in respect of measles, and only 31 notifications were received in connection with all other notifiable infectious disease, which is a very low figure.

Measles:-

After being free from this disease for some time, it appeared in November 1944, spread rapidly through the District and disappeared at the end of the second quarter. The disease appeared in different parts of the District simultaneously and the majority of the patients were children aged between 5 years and 15 years.

The age distribution of the cases is shown in the following table:-

Analysis of Total Notified Cases According to Age.													
Disease.	Under 1	1+	2+	3+	4+	5+	10+	15+	20+	35+	45+	65+	Totals.
Measles	3	3	13	5	1	93	61	5	2	-	-	1	187
Whooping Cough	1	-	2	1	-	8	3	-	-	-	-	-	15
Pneumonia	-	-	-	-	-	-	-	-	1	-	-	1	2
Scarlet Fever	-	1	-	-	-	2	2	-	-	-	-	-	5
Diphtheria	-	-	-	-	-	-	-	1	1	-	-	-	2
Dysentary	-	-	-	-	1	1	-	1	1	1	1	-	6
Puerperal Pyrexia	-	-	-	-	-	-	-	-	-	1	-	-	1
Totals	4	4	15	6	2	104	66	7	5	2	1	2	218

One death was recorded as being due to measles, which gives a death rate of 0.12 per 1,000 of the estimated resident population. This figure for England and Wales for the same period was 0.02.

Of the remaining notifications, little need be said. There were 5 cases of scarlet fever notified, all of a very mild type with no deaths. In addition only two cases of diphtheria were notified. The incidence of diphtheria has tended to fall in recent years. Formerly, it was the most important infectious disease, and the District was seldom free from it for any length of time. Whilst small outbreaks did occur the measures of control are good and it was possible to keep the incidence within bounds. Unfortunately, measles is a very difficult disease to control. The infectivity is high especially in the early stages when the disease resembles a cold in the head, and many cases are never seen by a Medical Practitioner. Quite a number of parents regard measles as an insignificant disease of childhood. At the present time, measures of control are difficult but in the future the Council may wish to consider more active measures.

The following table gives the incidence of notifications according to quarter:-

Notification Received According to Quarters.

Disease.	1st. Quarter.	2nd. Quarter.	3rd. Quarter.	4th. Quarter.	Year.
Measles	122	64	1	-	
Whooping Cough	4	8	2	1	
Pneumonia	2	-	-	-	
Scarlet Fever	3	-	2	-	
Diphtheria	1	-	1	-	
Dysentery	-	4	1	1	
Puerperal Pyrexia	-	-	1	-	

From the above table it will be seen that 6 notifications of dysentery were received. These cases were all of the Sonne type and were all confirmed by laboratory methods. The disease is mild and consequently there are many missed and unrecognised cases. The incidence suggested by these figures is, in my opinion, very much below the true incidence. Owing to the number of unrecognised cases and to the fact that articles of food and flies may also participate in the spread of the disease, the control of the disease is difficult when it has become established in a population.

Notifications Received. - Hospital Cases & Deaths.

Disease.	Cases Admitted to Hospital.	Deaths.
Measles	1	1
Whooping Cough	-	-
Pneumonia	-	3
Scarlet Fever	3	-
Diphtheria	-	-
Dysentery	-	-
Puerperal Pyrexia	1	-

Diphtheria Immunisation:-

The efforts to secure the protection of the susceptible population continued throughout the year. In this work the willing co-operation given by the Medical Practitioners in the area has been invaluable, for most parents seem to prefer to have the injection given by the family practitioner, especially so with young children.

The following table gives particulars of the number of children given courses of prophylactic during the year:-

Number of Children who had completed a full course of
Immunisation during Year 1945.

Age at 31.12.45 i.e. Born in Year-	Under 1 1945	1 1944	2 1943	3 1942	4 1941	5 - 9 1936-40	10 - 14 1931-35	Total under 15
Number Immunised	2	55	31	6	2	8	1	105
Estimated mid-year population 1945	695					1280		1975

Whilst these figures are quite good, nevertheless they cannot be regarded as fully satisfactory. Every effort must be made to ensure that every child has been given one prophylactic course and that the protection has been maintained.

The number of children under 15 years of age who received a prophylactic course was 105. This represents a decrease of 35 upon the figures for the previous year. As there were 157 live births in the year 1944, this suggests that all children are not being given a prophylactic course at the age of one year.

It is possible that the number of children who have been protected is slightly higher than the figures suggest, as in a few instances, children receive protective injections but the Department does not receive any record of this, and the recorded number is, therefore, lower than the actual figure.

The following table gives a summary of the state of protection up to the end of the year:-

Children Immunised At Any Time Up to 31st December, 1945.			
Age Group.	0 - 4 years.	5 - 14 years.	Total under 15 years.
Number Immunised.	339	1058	1397

It is estimated that 49% of children under the age of 5 years, and 83% of those aged from 5 years to 14 years were protected. If these groups are put together 71% of the child population under 14 years of age has received protective treatment. At least 90% in each group seems to be possible.

Owing to a number of factors it has not been possible to give routine final Schick Tests, and the number of reinforcing doses of prophylactic given has been insignificant. Further educative measure will be necessary before these procedures become popular.

The two cases of diphtheria which were notified related to persons over the age of 15 years who had never received any prophylactic treatment. There were no deaths attributed to this disease.

Scabies:-

There were no cases of scabies reported to the Department during the year.

The efficiency of notification of infectious disease is high, and I am pleased to report that all infectious disease is reported to the Department promptly by the Medical Practitioners. The fullest co-operation exists between the Officers of the Department and the doctors practising within the Area,

Tuberculosis:-

At the end of 1944 there were 48 cases of tuberculosis on the Register, 35 pulmonary and 13 non-pulmonary. During the year 1945, 6 cases were added to the Register, 4 pulmonary and 2 non-pulmonary. 4 cases were removed from the Register during the year, 2 pulmonary and 2 non-pulmonary, and on 31st December, 1945, 50 cases remained on the Register, 37 pulmonary and 13 non-pulmonary.

New Cases and Mortality during Year 1945								
Age Periods.	NEW CASES.				DEATHS.			
	Respiratory.		Non-respiratory.		Respiratory.		Non-respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
0+	-	-	-	-	-	-	-	-
1+	-	-	-	-	-	-	-	-
5+	-	-	-	-	-	-	-	-
15+	1	-	1	-	-	1	-	-
25+	1	-	-	1	-	-	-	-
35+	1	-	-	-	-	-	-	-
45+	-	1	-	-	-	-	-	-
55+	-	-	-	-	-	-	-	-
65+	-	-	-	-	-	-	-	-

One death was attributed to pulmonary tuberculosis. There were no deaths due to the non-pulmonary forms, or deaths due to tuberculosis in cases not previously notified.

CAUSES OF DEATH.

The following table gives the cause of death according to sex:-

Causes of Death during Year 1945.				
No.	Cause.	M.	F.	Total.
6.	Tuberculosis of Respiratory System	-	1	1
8.	Syphilitic Diseases	1	-	1
9.	Influenza	-	2	2
10.	Measles	-	1	1
13.	Cancer of Mouth & Gullet	1	-	1
	Cancer of Womb	-	1	1
14.	Cancer of Stomach and Duodenum	-	1	1
15.	Cancer of Breast	-	1	1
16.	Cancer of all other Sites	4	1	5
17.	Diabetes	-	1	1
18.	Intracranial Vascular Lesions	6	5	11
19.	Heart Disease	13	13	26
21.	Bronchitis	7	1	8
22.	Pneumonia	2	1	3
23.	Other Respiratory Diseases	2	-	2
24.	Ulcer of Stomach or Duodenum	2	-	2
25.	Diarrhoea (Under 2 years)	-	2	2
26.	Appendicitis	-	1	1
27.	Other Digestive Diseases	2	4	6
28.	Nephritis	4	1	5
30.	Other Maternal Causes	-	2	2
32.	Congenital Malformations etc.	1	1	2
35.	Violent Causes	2	-	2
36.	All Other Causes	8	4	12
All Causes		55	44	99

